

**DISTRICT OF COLUMBIA**  
**DOH Office of Adjudication and Hearings**  
825 North Capitol Street N.E., Suite 5100  
Washington D.C. 20002

<div style="border-bottom: 1px solid black; margin-bottom: 10px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"></div> <div style="text-align: center; padding: 5px;">Petitioner,</div> <div style="text-align: center; padding: 10px 0 10px 40px;">v.</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"></div> <div style="text-align: center; padding: 5px;">Respondents</div>	<div style="border-bottom: 1px solid black; margin-bottom: 10px;"></div> <div style="padding: 5px 0 5px 10px;">Case No.: _____</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"></div>
--	--

**Motion for Extension of Time**

I / We hereby request an extension of time for the filing due on \_\_\_\_\_ day of \_\_\_\_\_, 2001. I / We suggest an extension of time \_\_\_\_\_ day of \_\_\_\_\_, 2001 at \_\_\_\_\_ AM / PM. I / We cannot submit the requested document(s) in this matter for the following reason(s):

I certify that I contacted the opposing party or his/her authorized representative regarding this motion on \_\_\_\_\_ (date) and he/she has stated that he/she:

consents or does not oppose  
opposes

**- OR -**

I certify that I made a good faith effort to contact the opposing party or his/her authorized representative regarding this motion on \_\_\_\_\_ (date) by telephone / fax / mail (circle all that apply) but have not received a response as of \_\_\_\_\_ (date).

\_\_\_\_\_  
Name

\_\_\_\_\_  
Firm/Office/Business (if applicable)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State                      Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Facsimile Number

I further certify that I have faxed / mailed (circle all that apply) a copy of this document to the opposing party or his/her authorized representative.

Representative for:      Petitioner      Respondent

Respectfully Submitted,

\_\_\_\_\_  
Bar Number (as applicable)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date